FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

OCUMENT # Corporation Name	V51328	
OCUMENT #	V51328	

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FILED Mar 14 1997 8:00am Secretary of State

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Principal Plac	e of Business	Mailing Address						dii uldii bildii	
103 S. OSCEOLA AVENUE 103 S. OSCEOLA AVENUE									
SUITE 1 SUITE 1 ORLANDO FL 32801 ORLANDO FL 32801-2837									
					3. Date Incorporated or Qualified	3e Dot	e of Last R	Roport	
US		US				07/17/1992	1	7/1996	report
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			pplied For
21 26							ot Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc				5. Certificate of Status Desired			Additional		
22		27							equired
City & Stat	e	City & State				6. Election Campaign Financing	_		May Be
Zip	Country	28 Zip	Country			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30	,		Florida Statutes		ax under s No	3. 199.032,
	9. Name and Address of Curr		1001		Ann deligraph square	10. Name and Address of New R			
FVA	NS JR., ROBERT F			81	Name				
	S. OSCEOLA AVENUE			82	Street Addr	ess (P.O. Box Number is Not Accepta	ıble)		
SUIT	= :								
ORL	ANDO FL 32801			83					
				84	City		P# 1	85 Zip	Code
11 Durament	to the provinces of Continue COT O	IO2 and CO7 1000 Elected State	too the of		nomed som	evation authority this statement for the	FL	handing i	ile togistered
office or r	registered agent, or both, in the Sta	te of Florida. Such change was	authorizo	d by	the corporati	oration submits this statement for the ion's board of directors. I hereby acce	ept the appo	intment as	registered
	im familiar with, and accept the obl	igations of, Section 607.0505, F	ionda Stal	utes	i.,				1
SIGNATURE	Signature typod or printed name of registered a	gest and title if applicable (NO	II : Rogisteres	d Age	nt signature require	ed when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	RS IN 12
TITLE	P	☐ DELFT€	1170	T (F			ļ	Change	Addition 3
NAME	PATE, RICHARD		12 N						7
STREET ADDRESS		IC DONOUGH GA		1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2.1 THLE					
CITY+ST-ZIP TITLE	MC DONOUGH GA							Change	Addition C
NAME .		DECT IC					'		
STREET ADDRESS				2.2 NAME 2.3 STREET ADDRESS					-
CITY-ST-ZIP			a fi		T - ZiP		e		ĺ
TITLE		DELETE	3111	•		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME			3.2 NAME			:			
STREET ADDRESS			3.3 S1	REFT	ADDRESS				(
CITY-ST-ZIP			3.4 C	IIY - 5	1-ZIP				
TITLE		☐ DELF1E	411					Change	Addition
NAME			4 2 N						1
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP		DELETE	4.4 C)		1 - 7IP		·	Change	Addition
TITLE NAME		L) DETER	5.1 TF 5.2 NA				'	change	ריי אמטיווטוו
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.4 OI						Į
TITLE	<u> </u>	DELETE	6.1 11					Change	Addition
NAME			62 N/					-	
STREET ADDRESS			6.3 S1	ACET	ADDRESS				
CITY-ST-ZIP			6,4 CI	1Y-S	T- 71P				1
14. I do herel	by certify that the information supplies indicated on this appual report of	ed with this filing does not qual	lify for the	exe	mption stated	Fin Section 119.07(3)(i), Florida Statut	es. I further	certify that	the

Information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under or Lam an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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